

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re P	atent Application of	)				
James	Chris SACKELLARES et al.	Group Art Unit: 3736				
Applic	ation No.: 10/648,354	) Examiner: Unassigned				
Filed:	27 August 2003	) Confirmation No.: 3420				
For:	OPTIMIZATION OF MULTI- DIMENSIONAL TIME SERIES PROCESSING FOR SEIZURE WARNING AND PREDICTION	) ) ) )				
	AMENDMENT/REPLY T	RANSMITTAL LETTER				
P.O. B	issioner for Patents Sox 1450 Idria, VA 22313-1450					
Sir:						
Eı	nclosed is a reply for the above-identified pa	atent application.				
ſ	A Petition for Extension of Time is also enclosed.					
[	A Terminal Disclaimer and the [ ] \$55.00 (2814) [ ] \$110.00 (1814) fee due under 37 C.F.R. § 1.20(d) are also enclosed.					
[X	Also enclosed is/are Request For Corr	Also enclosed is/are Request For Corrected Filing Receipt				
]	] Small entity status is hereby claimed.	Small entity status is hereby claimed.				
[	Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the [ ] \$385.00 (2801) [ ] \$770.00 (1801) fee due under 37 C.F.R. § 1.17(e).					
	[ ] Applicant(s) requests that any previously unentered after final amendments <u>not</u> be entered. Continued examination is requested based on the enclosed documents identified above.					
	[ ] Applicant(s) previously submitted requested.	, on, for which continued examination is				
	does not exceed three months from	of action by the Office until at least, which in the filing of this RCE, in accordance with led fee under 37 C.F.R. § 1.17(i) is enclosed.				

Amendment/Reply Transmittal Letter Application No. <u>10/648,354</u> Attorney's Docket No. <u>028724-142</u> Page 2

[ ]	A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a)
	(1809/2809) is also enclosed.

[X] No additional claim fee is required.

[ ] An additional claim fee is required, and is calculated as shown below:

and bank to the or	No. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	Add'l Fee
Total Claims		MINUS =		× \$18.00 (1202) =	
Independent Claims		MINUS =		× \$86.00 (1201) =	
If Amendment adds mul	ltiple depend	ent claims, add \$290	0.00 (1203)		
Total Claim Amendmen	it Fee				
If small entity status is o	claimed, sub	tract 50% of Total C	Claim Amendn	nent Fee	

L	J	A check in the	amount of \$	is enclosed for the fee di
[	]	Charge \$	to Deposit Accoun	nt No. 02-4800.

By:

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

Date: 08 December 2003

M. David Ream

Registration No. 35,333

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